95004010

95 JAN 24 AN 9: 09

BOND #EX 556-647

KNOW ALL MEN BY THES	E PRESENTS, TI	18 A NFA C.	A VALUE OF THE PROPERTY OF THE	
KNOW ALL MEN BY THES CORA SUE MOLLICK Dyer, IN as principa		CHIEF DEP RECORDS		
DyerINasprincipa.	1and	- · · · · · · COHDE	H	
AMERICAN STATES INSU		and the second of the second o	rety	
e held and firmly bound unto The	State of Indiana,	and for the benefit of person	ons concerned or	aggrieved, in
e penal sum ofSEVENTY FIVE bllars, to the payment of which w	THOUSAND AND N	O/100 made, we bind ourselves, or	ur heirs, executor	75,000.00)
trators, jointly and severally, fir	14. The second of the second o	and the state of t		
y of December	1.400.00		1.00	**************************************
그 경화를 보고 있었다. 그 그렇게 되는 방법 그		THIS OBLIGATION		
WHEREAS, the above named				
as been duly elected and commis				
r Lake		SCHOOL	L CORPORATION	in and
om the 4th d duly sualised ending Novem	ber 4 D 95CU	ment is	and untik	xxx xxxxxxxx
Now, if the said	A Partie of the Control of the Contr		sh	all faithfully
rform and discharge his duties:				
d pay over on demand to the pe				
to his hands as such Deputy		250 miles		**
ow in force, and exact any and segislature, without in any way on in that case, the above obligated virtue in law.	and further, that all laws during the or manner releasing	t the Legislature may char e existence of the above ob g the said officer or his said	nge, modify or re ligation at the pl l securities on sai	epeal any law easure of the d bond; then,
	W. W. W.	and In	mally	[Seal]
	[Seal]	Gora Sue Mollick		[Seal]
				[Seal]
	[Seal]	AMERICAN STATES	INSURANCE COM	PANY[Seal]
		SEAL OF	-00	,
	[SSW]	Dorothy Satphin	Atto	[Seal] rney-in-fac
Accepted and approved this.	Nth	day of JANUARY	, A	. D. 1995
		1975 - 1974 - 1975 1984 - 1984 - 1985	ning teacher to the second of	and the second of the second o

	AIZE		•••••	••••••
tate of Indiana, ^L	AKE			
Personally appeared before a	me. CORA	SUE MOLLICK	. *	
and for said County and State ho being sworn, upon his oath s	aforesaid, COR	A SUE MOLLICK		•••••
"I will support the Constitut		States and of the State of	Indiana, and I v	vill faithfulls
onestly and impartially discharged SCHOOL CORPORATION to the	re the duties of th	e office of m. DEPUTY TI		
	TO MARK OF THE BYTHE		•	
A 1/58 27 S. M.		Cors S,	Mollick	<i></i>
A PARTY STATES			Molleck Huary	, 19.5 ₁
A PARTY STATES			Matheur	, 19.5

ACKNOWLEDGMENT OF PRINCIPAL STATE OF INDIANA, COUNTY, SS: Personally appeared before me, principal upon the bond appearing on the reverse side hereof and acknowledges the execution of said bond .day of... Official capacity Expiration date of commission, if Notary Public ACKNOWLEDGMENT OF SURETY STATE OF IN COUNTY OF Marion SS: Comes now American States Insurance Co. by Dorothy Sutphin its agent, surety upon the bond appearing on the reverse side hereof and acknowledges the execution of said bond this 16th day of December Document Stion Expires: 4/3/96 Official capacity Expiration date of commission, if Notary Public This Document is the property of the Lake County Recorder! and recorded in Bond Record. To

American States Insurance Company Indianapolis, Indiana

	SAT.I.Y	TINKLE	DOROTHY	SUTPHIN,	T.TNDA	<u> </u>	DING	ΛÞ	LICT D	N T	ET AVE	
			DOING:111	<u> </u>	MILION	<u> </u>	FING	UN.	THALE			
1		Indiana	polis	11337	d State of _	- diddin dida		<u> </u>	ndia	08	100	
s true and lawle	ul Attorney(nd authority here	eby contern	ed in	its name	, plac	e and s	tead, to	execute.	cknowledge an
leliver any and al	ll bonds, red	cognizances, c	ontracts of inde	mnity and other	conditional	or obl	igatory u	nderta	kings,	pro	vided,	however,
that the	penal	sum of a	any one s	such inst	rument	exe	cute	l he	reun	der	shall r	ot exceed
FIVE HUND	DRED_TI	OUSAND 1	ND NO/10	00 (\$500,0	000.00) DC	LLAR	}				
Or Assistar	by its Secreti ed pursuant rman, the P nt Vice-Presi	ary, hereby ratification to and by authorities identifications are identificated as in the control of the contr	lying and contirr prity granted by v Vice-President prower, by and	ning all that the a	iaid Attorney the By-Laws Executive Vi	of the	act may of American sident, S	to in the State	e premis s Insurai /ice-Pres	es. This nce Con sident, S	Power of At npany, which Second Vice	torney is execute reads as follows -President
IN WITNESS	WHEREOF	, American Sta	les Insurance u	Company has ca	used these	preser	its to be	eigned	by its S	econd '	Vice-Preside	nt, attested by it
Assistant Vice-Pre	sident and	its corporate s	ted to be here	to affixed this		day o			Jan.	outribles over the con-		
I'D' IA		This	Docum	n ønt is 1	the na	AN S	TATES IN	ISURA	NCE CO	JMPAN	Y	
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() (LS) (Ass	istant Vice-Pre	sident	The state of the s	Бу	400		Sec	ond Vic	e-Presid	dent	
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TATE OF INDIA	ANA		(Mar. 14)			75 KA		1. 4			-37,827	(i (Se
COUNTY OF MA	ARION	SS					1					
On this	31e+			Decemb	er			THE		92		
On this	טעט.	day of				1820		, A	.U., 19.	- '	before me	personally car
				Joseph F.	Hoim	Anada juga	es e e e e e e e e e e e e e e e e e e				14046	
eing by me dul	y sworn, ac	cknowledged				ind die	d depos	and	sav: the	t he is	a Second	me known, wi Vice-President
merican States eal; that it was s	Insurance	Company: the	at he knows th	ne seal of said	Corporation	n: that	the sea	affixe	ed to the	said l	nstrument	is such coroors
Joseph F	Heim			at Ke'ls acquair		Je	ohn J	R	osici	1	30.00	7.00
ssistant Vice-Pi			tion; and that	ne executed th	ne above in			C76.34		/	ano kno	ws him to be t
* and			A Supplier	M nt≘r≘	TI CE	1						
KATHLEE JOHNSON C		NOTARY				1	THE	Re.	4		كعدث	
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TATE OF INDIA COUNTY OF MA 1. John ne above and to s still in force as	regoing is and effect.	a true and corr e signed and r	ect copy of a f sealed by facs	Vice-President Power of Attorne imile under and	ey, execute	d by s	aid AME	RICAN	STATE	ES INS	URANCE C	ereby certify the OMPANY, which
TATE OF INDIA OUNTY OF MA I. Joh Re above and to still in force as This Certific NSURANCE CC "All policies a the president or Assistant V by an authori	regoing is and effect, ate may be DMPANY wand other in or any vice-vice-Preside ized repres	a true and correct signed and a chich reads as nostruments of president (incent) and the secondary of the se	rect copy of a fine sealed by facs to follows: insurance issuit insurance issuicteding any Experiency, assist e Corporation.	ower of Attorned imile under and used by the Corpective Vice-Property, on may be facsing the control of the con	by, executed by the authoration ship esident, Se or other officentiles, Such	thority all be a nior V er, when signer	aid AME of Sect signed of ice-Presions sign atures ar	n behident, atures	N STATE O3 of the self of the Vice-Pre is, if the in similes in	ES INS e By-Li e Corpo esident nstrum thereof	urance c aws of AME pration by the Second Vient is duly of shall be as	ereby certify the OMPANY, which ompany, which ompany which ompany the Chairman, ce-President, countersigned and
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THIS POWER OF ATTORNEY MUST CONTAIN A VALIDATING STATEMENT PRINTED IN THE MARGIN HEREOF IN RED INK, WITH A RED DIAGONAL IMPRINT - AMERICAN STATES INSURANCE - PRESENT IN ITS ENTIRETY. IF YOU HAVE ANY QUESTIONS REGARDING THE VALIDITY OF THIS POWER OF ATTORNEY, CALL 317-262-6262 OR WRITE US AT P.O. BOX 1636, INDIANAPOLIS, IN 46206-1636.